



PROVIDER BULLETIN

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March 19, 2020

DIABETIC SUPPLIES

APPLIES TO: Pharmacy and DME providers and billers

EFFECTIVE DATE: April 1, 2020

- Continuous Glucose Monitoring Devices
- Covered Diabetic Supplies

Continuous Glucose Monitoring Devices

The MO HealthNet Division (MHD) will begin covering the Dexcom G6 Continuous Glucose Monitoring (CGM) System as the preferred CGM system on April 2, 2020. You can find the Clinical Edit criteria for CGM approval on our website at the following link: https://dss.mo.gov/mhd/cs/pharmacy/pdf/cgms-clinical-edit.pdf. CGMs will be reimbursed through the Pharmacy Program and must be submitted using the item's 11-digit National Drug Code (NDC) in the Point-of-Sale system or on a pharmacy claim form.

You can initiate a requests for prior authorization by contacting the MO HealthNet Pharmacy Help Desk at (800) 392-8030 or by faxing the <u>Continuous Glucose Monitoring Device Prior Authorization</u> form to (573) 636-6470.

Note: Medicare covers CGMs for Medicare-eligible patients. Providers should bill Medicare according to Medicare established policies for their Medicare-eligible patients.

Covered Diabetic Supplies

The MHD selected One Touch Verio and One Touch Ultra as the preferred blood glucose monitoring systems; and Techlite Pen Needle and BD Insulin Syringe as the preferred products for participants with diabetes. These items will be preferred starting April 1, 2020. You can find a detailed list of covered diabetic supplies at the following link: https://dss.mo.gov/mhd/cs/pharmacy/pdf/DiabeticSupplyQuantityLimitFiscalEdit2New.pdf.

To initiate a request for a non-reference diabetic supply product, fax the <u>Diabetic Supplies</u> <u>Prior Authorization</u> form to (573) 636-6470. Reviews for prior authorizations of non-reference products are on an individual patient basis and evaluated for medical necessity.

Note: Medicare reimburses diabetic supplies for Medicare-eligible patients. Providers are to bill Medicare according to Medicare established policies for diabetic supplies for their Medicare-eligible patients.

Provider Bulletins are available on the MO HealthNet Division (MHD) website at http://dss.mo.gov/mhd/providers/pages/bulletins.htm. Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD website at http://dss.mo.gov/mhd/ to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

Provider Communications Hotline 573-751-2896